# 2016-10-25-05-001-2994

FE6AN026

**FEC** FORM 3X

# **REPORT OF RECEIPTS** AND DISBURSEMENTS For Other Than An Authorized Committee

FEC MAIL CENTER 2016 OCT 25 AM 7: 18

Office Use Only

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4.	(Choose	OF REPOR		. ` F	Monthly Report Due On:		Feb 20 (M2)	السا	. May 20 (M			ug 20 (M8) ep 20 (M9)		Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election
,		April 15 Quarterly Re July 15 Quarterly Re October 15	eport (C	. (0	) 12-Day <b>PRE</b> -E Report	lectio	<del></del>	Primary (1:	•		Gene	oct 20 (M10) ral (12G) al (12S)		Year Only) Jan 31 (YE) Runoff (12R)
		Quarterly Re January 31 Year-End Re				E	lection on	M · M	/ 6 6	<u> </u>			in the State of	
		July 31 Mid- Report (Non Year Only) (	-electio	on (c	) 30-Day POST- Report	Electi	<u></u>	General (3	0G)		Runot	f (30R)		Special (30S)
		Termination (TER)	Report	t		E	lection on		/ 0 4 0	′ [	* * * * *		in the State of	
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NO.	TE: Subr	mission of false	, erron	neous, or	incomplete	inforr	mation may s	ubject the p	erson signin	g this	Report t	o the penaltic	es of 2 L	J.S.C. §437g.
	1	Office Use										FEC	FOR	м зх

# 20-6-10-25-09-00-12995

## SUMMARY PAGE

FEC Form 3X (Rev. 02/2003)		Page 2
Write or Type Committee Name		****
INDIANA REPUBLIC	CAN ASSEMBLY SUPE	RPAC
Report Covering the Period: From:	المخجمة المعتقا السخت	·· [84] 30 125 13
	COLUMN A This Period	COLUMN B Calendar Year-to-Date
January 1,		(129
(b) Cash on Hand at  Beginning of Reporting Period	(85.7)	
(c) Total Receipts (from Line 19)	184336	206036
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	1,91,193	2.05.90
'. Total Disbursements (from Line 31)	1,9085(	205565
Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	[	342
Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D)		
Debts and Obligations Owed BY     the Committee (Itemize all on     Schedule C and/or Schedule D)	[7,00067]	

## For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

# 2016 10 25 0M 00112996

# **DETAILED SUMMARY PAGE** of Receipts

	FEC Form 3X (Rev. 06/2004)	·	Page 3
	frite or Type Committee Name		
4	INDIANA REPUBLICAN	ASSEMISLY SOF	er pac
R	eport Covering the Period: From:	/ <b>O</b> / 20 C	09/39/2016
	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11.	Contributions (other than loans) From:  (a) Individuals/Persons Other  Than Political Committees  (i) Itemized (use Schedule A)	1,46500 37830 1,84,330	1,4,6,5 <u>90</u> 5,753,6 2,06,036
12.	(b) Political Party Committees  (c) Other Political Committees     (such as PACs)	184336	206036
13.	All Loans Received		
15. 16. 17.	Loan Repayments Received		
	(b) Levin Funds (from Schedule H5)		
	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	1.843.36	20636

(subtract Line 18(c) from Line 19) ........ ▶

## **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)	Total Tills Teriou	Calelidal Teal-to-Date
	(i) Federal Share		
	(ii) Non-Federal Share		
	(b) Other Federal Operating Expenditures	100 751	1546
	(c) Total Operating Expenditures		
	(add 21(a)(i), (a)(ii), and (b))▶	10075	115463
22.	Transfers to Affiliated/Other Party		
	Committees		
23.	Contributions to Federal Candidates/Committees and Other Political Committees		
	Independent Expenditures		
25.	(use Schedule E)	5.000	5.768.0
	(use scriedule 1)		
26.	Loan Repayments Made	3,2500	250
27. 28.	Loans MadeRefunds of Contributions To: (a) Individuals/Persons Other Than Political Committees		
	(b) Political Party Committees		
	(b) Political Party Committees(c) Other Political Committees		
	(such as PACs)		
٠	(d) Total Contribution Refunds		
	(add Lines 28(a), (b), and (c))▶	ليميميميا	
29.	Other Disbursements		
30.	Federal Election Activity (2 U.S.C. §431(20))		
	(a) Allocated Federal Election Activity		
	(from Schedule H6)		
•	(i) Federal Share		
	(ii) "Levin" Share		
	(b) Federal Election Activity Paid Entirely		
	With Federal Funds		
	(c) Total Federal Election Activity (add		
	Lines 30(a)(i), 30(a)(ii) and 30(b))▶		
31.	Total Disbursements (add Lines 21(c), 22,	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	00677
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	1,450,51	LU \$ 3 05
32.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)	105051	007676
	from Line 31)	[7,6,8,7]	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~

38. Net Operating Expenditures

(subtract Line 37 from Line 36) ......

## **DETAILED SUMMARY PAGE**

of Disbursements

Page 5 FEC Form 3X (Rev. 02/2003) **COLUMN A** COLUMN B III. Net Contributions/Operating Ex-**Total This Period** Calendar Year-to-Date penditures 33. Total Contributions (other than loans) (from Line 11(d), page 3) ..... 34. Total Contribution Refunds (from Line 28(d))..... 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) ..... 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ........▶ 37. Offsets to Operating Expenditures (from Line 15, page 3).....

SCHEDULE A	(FEC	Form	3X)
ITEMIZED REC	EIPTS	;	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE OF (check only one)  11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Statements or for commercial purposes, other than using the name at NAME OF COMMITTEE (In Full)	nd address of any political committee	to solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  A. Mailing Address  City  FEC ID number of contributing federal political committee.  Name of Employer  CROWN MARK MC6  Pagint For	18 AUE  Zip Code  WOZZY	Date of Receipt  Amount of Each Receipt this Period
Descipt For:	Zip Code	Amount of Each Receipt this Period
Mailing Address  HOGS MAIN  City  SHERI IAN  FEC ID number of contributing federal political committee.  Name of Employer  TARGET SPATI  Fosciet For:	1 46069	Date of Receipt  OF DE
SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number only)	· · · · · · · · · · · · · · · · · · ·	72500

SCHEDUL	EΑ	(FEC	Form	3X)
ITEMIZED	REC	EIPTS	;	

FOR LINE NUMBER: PAGE OF Use separate schedule(s) (check only one) for each category of the 11a 11b 11c 12 Detailed Summary Page 14 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. UBLICAN ASSEM Date of Receipt Mailing Address AUFORDSVILLE RD Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employe USED CARS Receipt For Aggregate Year-to-Date ▼ Primary Other (specify) Full Name (Last, First, Middle Initial). Date of Receipt Mailing Address State lb Amount of Each Receipt this Period FEC ID number of contributing 1C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ General Primary Other (specify) Date of Receipt ew Burn City State Amount of Each Receipt this Period FEC ID number of contributing 1C federal political committee. Occupation PAP OF EDUC Name of Employer Receipt For: Aggregate Year-to-Date ▼ Primary General 20000 Other (specify)  $\blacktriangledown$ SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FEC Schedule A (Form 3X) Rev. 02/2003

ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBE (check only one) 21b 22 27 28	23 24 25 26
Any information copied from such Reports and Statem or for commercial purposes, other than using the name		by any person for t	ne purpose of soliciting contributions
NAME OF COMMITTEE (IN FUII)  INDIANA RECUBUGAN	ASSUMBLY	SIPER	PAC
Full Name (Last, First, Middle Initial)  A.  PRYX  Mailing Address  MACKET ST	L	Date	of Disbursement
City SAN FRANCISCO S Purpose of Disbursement WEB FUNDING	State Zip Code SHO3	Amo	unt of Each Disbursement this Period
		Category/ Type	<b>6</b> 000
Full Name (Last, First, Middle Initial)  B.  Mailing Address  MARKET  T		Date	of Disbursement
Mailing Address 1455 MARKET ST  City SAN FRANCISCO Purpose of Disbursement MDBUE FUNDING  Candidate Name	State Zip Code 3	Amc	unt of Each Disbursement this Period
L_	nent For: Primary General Other (specify) ▼		
C. (Last, First, Middle Initial)  Mailing Address  MAIN 57		Date	e of Disbursement
Purpose of Disbursement  POSYAGE  Candidate Name		Category/ Type	ount of Each Disbursement this Period
	nent For:  Primary General  Other (specify)		
SUBTOTAL of Disbursements This Page (optional)  TOTAL This Period (last page this line number only)			6096

SCHEDULE B	(FEC	Form	3X)
ITEMIZED DISE	BURSE	MENT	rs

SCHEDULE D (FEC FORM SX)	llos concreto cohedula/s\	FOR LINE NU	
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	<u> </u>	27	28a 28b 28c 29 30b
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NAME OF COMMITTEE (IN FUII)  NO (AND A REPUB	LICAN AS	REMB	by super pac
Full Name (Last, First, Middle Initial)  A. RICK TRAVER-CC			Date of Disbursement
Mailing Address  ACE MADLE RD		,	Constitution Constitution and Constitution of
DEALUGE NO	State Zip Gode O	)	
Purpose of Disbursement  ADIO AD		NAME OF THE OWNER.	Amount of Each Disbursement this Period
Candidate Name DONALD TRUMP		Category/ Type	576,00
Office Sought: House Disburser Senate President State: District:	nent For: Primary General Other (specify)		
Full Name (Last, First, Middle Initial)  B.			Date of Disbursement
BROWN DOWNA M	0.5		68 23 2016
5720 PORT AT PRICE	State Zin Code		Control Contro
Purpose of Disbursement	(N 46224		1
LOAN REPAYMENT Candidate Name			Amount of Each Disbursement this Period
		Category/ Type	12590
Office Sought: House Disburser Senate President State: District:	Primary General Other (specify)		
Full Name (Last, First, Middle Initial)  C. Could Tild Oth Communication			Date of Disbursement
Mailing Address On Car Time	1 . –		0) of see 7016
Mailing Address 3030 ROOSEVELT A City (ND (ANACOLL)	State Zip Code		**************************************
Purpose of Disbursement	(N 46218	en stouget and	
Candidate Name		Category/	Amount of Each Disbursement this Period 4628
Office Sought: House Disburser Senate President State: District:	nent For: Primary General Other (specify)		o program, services i establis establis programa programa (2004) de la companya (2005). De la companya (2005)
SUBTOTAL of Disbursements This Page (optional)			
TOTAL This Period (last page this line number only)	<u></u>	<del></del>	85778

SCHEDULE B (FEC Form 3X)	Han annual art a title	FOR LINE NUMBER:	PAGE OF
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)  21b 22 23 23 27 28a 28b	24 25 26 28c 29 30b
Any information copied from such Reports and Statem	ents may not be sold or used		<del></del>
or for commercial purposes, other than using the nam	e and address of any political	committee to solicit contributions to	om such committee.
NAME OF COMMITTEE (IN FUIL)	ICAN ASS	EMBLY SUPE	npac
Full Name (Last, First, Middle Initial)  A.		Date of Disbursem	ent
MODIAFIRE		ZCC 77	7516
Mailing Address 1924 DAVID MONIE	RIKE DRIVE	Ball Addition ( Secretaria	
CHEVANDOHH T	tate Zip Code 77385		
Purpose of Disbursement  /   /	. **	Amount of Each D	isbursement this Period
Candidate Name	•	Category/ Type	1500
Office Sought: House Disburserr	nent For:  Primary General		Control of
·	Other (specify)		
Full Name (Last, First, Middle Initial)			
B. MEIJER, STAPLES W	ARMART	Date of Disbursem	ent
MEITER, STAPLES W Mailing Address W PIKE PLA	ZA RD	07 2	2 2016
	tate Zip Code	4	
Purpose of Disbursement	i.	Amount of Each D	isbursement this Period
Candidate Name		Category/ Type	3690
Office Sought: House Disbursen	nent For: Primary General		
President State: District:	Other (specify)		
Full Name (Last, First, Middle Initial) C.		Date of Disbursem	nent
RESTORING FLORE C	omunity Class	66 50	2071a
Mailing Address HOSO W 62 M St City  City  City  City  Control  City  Ci		07 21	- Committee Antiques
City	State Zip Code 26	B	
Purpose of Disbursement	139		
Candidate Name		Category/ Type	isbursement this Period
Office Sought: House Disbursen		The second of th	
President	Primary i General Other (specify) ▼		
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# SCHEDULE B (FEC Form 3X)

SCHEDULE B (FEC Form 3X)	,	FOR LINE I	NUMBER: PAGE OF
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	Detailed Summary Page	27	22 23 24 25 26 28a 28b 28c 29 30b
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or for commercial purposes, other than using the nan	ne and address of any political	committee to	solicit contributions from such committee.
NAME OF COMMITTEE (IN FUII)  INDIANA REABL	ICAN ASSE	MBCY	super pac
Full Name (Last, First, Middle Initial)			Date of Disbursement
Mailing Address			09 22 2076
700 LANTERN RD	21-1 Onda		THE CONTRACT SHEET
IND (ANADOLIS	State Zin Code S(	9	
Purpose of Disbursement  LOAN REPLYMENT	.,,	emmanianati,	Amount of Each Disbursement this Period
Candidate Name	,	Category/ Type	100 00
Office Sought: House Disbursei	ment For:	Турс	. ระบบคำแบบ ละหน่าให้คนคำแหน่วยในหลอบครอดการที่ได้ เกาะสอบครอดการที่ได้ เกาะสดดลา "
Senate President	Primary General Other (specify) ▼		•
State: District: Full Name (Last, First, Middle Initial)			
B. 10 15(h)			Date of Disbursement
<del></del>	PEEDWAY . ~		
105 CHURCHAN AC	K		09 26 70 (6
BEECH GROVE (	State Zip Code		
Purpose of Disbursement	Ņ.	see and a supplement	Amount of Each Disbursement this Period
Candidate Name	· · · · · · · · · · · · · · · · · · ·	Catogony	Amount of Lacir Disbulsement this Fellou
·	• .	Category/ Type	26464
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)		
Full Name (Last, First, Middle Initial)			
C. OLIVE GARDEN.	29		Date of Disbursement
Mailing Address E 8200 St	7		09 28 2010
City NO ANA POCKS	State Zip Code	0	
Purpose of Disbursement			
Candidate Name		Category/	Amount of Each Disbursement this Period
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)	Туре	and the second of the respective of the second of the seco
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SUBTOTAL of Disbursements This Page (optional).			1094
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# SCHEDULE B (FEC Form 3X)

PAGE OF FOR LINE NUMBER: Use separate schedule(s) ITEMIZED DISBURSEMENTS (check only one) for each category of the 216 23 24 25 26 22 Detailed Summary Page 27 29 30b 28b Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) A. Date of Disbursement GUDADIY Amount of Each Disbursement this Period Category/ Type Office Sought: House Disbursement For: General Senate Primary President Other (specify) State: District: Full Name (Last, First, Middle Initial) Date of Disbursement Zip Code Purpose of Disbursement Amount of Each Disbursement this Period Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) ▼ State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Mailing Address City State Zip Code Purpose of Disbursement Amount of Each Disbursement this Period Candidate Name Category/ Type econol in management in the contract conditions in the Office Sought: House Disbursement For: Senate Primary General President Other (specify) State: District: SUBTOTAL of Disbursements This Page (optional)..... TOTAL This Period (last page this line number only).....

# SCHEDULE C (FEC Form 3X) LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE OF

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)	NILL SURVED DAG	
1 - (1)	SEMBLY SUPER PAC	
LOAN SOURCE Full Name (Last, First, Middle Initial)	Election:  Primary	
BOOWN, DONNA M	General	
Mailing Address DORT AN PRINCE, ACT	Other (specify) ▼	
City ND(ANAPOLIC State ( ZIP Co		
Original Amount of Loan  Cumulative Payment To		
Conginal Amount of Loan		
13000	82500 61500	
TERMS  Date Incurred Date Due	Interest Rate Secured:	
	727/72	
09 23 20 16 12 30 2	% (apr) Yes No	
List All Endorsers or Guarantors (if any) to Loan Source		
Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
Chata 7lh Cada	Amount	
City State ZIP Code	Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
Ivialing Augress	Occupation	
	Amount	
City State ZIP Code	Guaranteed Outstanding:	
3. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
•	Amount	
City State ZIP Code	Guaranteed	
4. Full Name (Last, First, Middle Initial)	Outstanding:	
The second secon		
Mailing Address	Occupation	
	Amount	
City State ZIP Code	Guaranteed	
	Outstanding:	
SUBTOTALS This Period This Page (optional)		
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TOTALS This Period (last page in this line only)		
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.		

# SCHEDULE C (FEC Form 3X) LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE OF

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full) INDIANA REPUBLICAN ASSUMBLY SUPER PAC			
LOAN SOURCE Full Name (Last, First, Middle Initial)	Election:		
LOTAT GOOTTOE Tail Haine (Edot; First; Middle Hittal)	Primary .		
DONIEL NORTHAN	<del>       </del>		
BROWN, DONNA M	General		
l Mailing Address	Other (specify)		
5720 PORT AU PRINCE, APT	(S)		
	ode 4(0224		
City IN DIAMAPOUS State (N ZIP Co	00e 40221		
Original Amount of Loan Cumulative Payment To	o Date Balance Outstanding at Close of This Period		
70000	17253 5827 67		
The second secon	Section Commerce of the Tourisment Remissioner Commerce C		
TERMS			
Date Incurred Date Due	Interest Rate Secured:		
1000 25 2017 VO 7	20110		
06 20 2013 72 31 3	(apr) Yes No		
Controllers (Marchines) Controllers (Marchines) (Marchines)	A CONTRACTOR OF THE PROPERTY O		
List All Endorsers or Guarantors (if any) to Loan Source			
Full Name (Last, First, Middle Initial)	Name of Employer		
1. Tun Manie (Last, Frist, Middle Rillia)	Hame of Employer		
	<u>                                     </u>		
Mailing Address	Occupation		
	A		
	Amount		
City State ZIP Code	Guaranteed		
	Outstanding:		
2. Full Name (Last, First, Middle Initial)	Name of Employer		
	The state of the s		
Mailing Address	Occupation		
	Amount		
City State ZIP Code	Guaranteed		
Only State 211 Code	Outstanding:		
	<u> </u>		
3. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
	<u> </u>		
	Amount		
City State ZIP Code	Guaranteed		
	Outstanding:		
4. Full Name (Last, First, Middle Initial)	Name of Employer		
T. I OR Walle (Last, I list, Wildele Hillia)	reame of Employer		
	<u> </u>		
Mailing Address	Occupation		
	Amount		
City State ZIP Code	Guaranteed		
Ony State ZIP Code			
	Outstanding:		
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SCHEDULE C	(FEC	Form	3X)
LOANS			

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE OF

led Summary Page FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)	4
INDIANA REPUBLICAN	ASSEMBLY SUPER PAC
LOAN SOURCE Full Name (Last, First, Middle Initial)	/ Election:
GEORGE HEZMS	. Primary  Aeneral
	Other (specify)
Mailing Address Slock CIRCLE	
City NORUSVICUS State // ZIP Co	de 46062
Original Amount of Loan Cumulative Payment To	Date Balance Outstanding at Close of This Period
SOD PO	20090
- marine confliction make the confliction of the co	Anna and millionicome managementalism in the fill accomplishment
TERMS	Interest Date
Date Incurred Date Due	Interest Rate Secured:
03 10 2015 12 50	% (apr) Yes No
List All Endorsers or Guarantors (if any) to Loan Source	
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
·	
City State ZIP Code	Amount Guaranteed
State ZIF Code	Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount
City State ZIP Code	Guaranteed
	Outstanding:
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TOTALS This Period (last page in this line only)	· management and some control of some control of the control of th
Carry outstanding halance only to LINE 3. Schedule D. for this line. If	no Schedule D. carry forward to appropriate line of Summary

SCHEDULE C	(FEC	Form	3X)
LOANS			

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE OF

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)			
INDIANT REPUBLICAN ASSEMBLY SUDER PAC			
LOAN SOURCE Full Name (Last, First, Middle Initial)	Election:		
MED ALL SENNIE	General		
70( LANTERN ROAD	Other (specify)		
<u> </u>	nde 4625 4		
Original Amount of Loan Cumulative Payment To	Date Balance Outstanding at Close of This Period		
A STATE OF THE PROPERTY OF THE	30200		
TERMS  Date Incurred Date Due	. Interest Rate Secured:		
11 15 2012 12 31 2	% (apr) Yes No		
List All Endorsers or Guarantors (if any) to Loan Source			
Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
·	Amount		
City State ZIP Code	Guaranteed Outstanding:		
2. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
	Amount		
City State ZIP Code	Amount Guaranteed		
3. Full Name (Last, First, Middle Initial)	Outstanding:  Name of Employer		
Mailing Address	Occupation		
City State ZIP Code	Amount Guaranteed		
	Outstanding:		
4. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
	Amount samman and and another than the contract of the contrac		
City State ZIP Code	Guaranteed Outstanding:		
	. Comp. To 1997 Tribed Application Company Co. (Company Company Compan		
SUBTOTALS This Period This Page (optional)			
TOTALS This Period (last page in this line only)			
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SCHEDU	LE E	(FEC F	orm	3X)
<b>ITEMIZED</b>	INDEPE	NDENT	EXPE	NDITURES

EMIZED INDEPENDENT EXPENDITURES	PAGE OF FORM 3X
INDIANA AKTUBLICAN ASSEMBL	FEC IDENTIFICATION NUMBER ▼  C 60522474
Check if 24-hour notice 48-hour notice	
Full Name (Last, First, Middle Initial) of Payee  TRANCH, RICK— CCRSHOW	Date PO POPULA
Mailing Address 764 MAPCE RD	Amount
City State Zip Code US State Zip Code	57.600
Purpose of Expenditure  Category/ Type  Type	Office Sought: House State: Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure:	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
Mailing Address	Amount
City State Zip Code	
Purpose of Expenditure  Category/ Type	Office Sought: House State: Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure:	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	57600
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	57600
Under penalty of perjury I certify that the independent expenditures reported herein were with, or at the request or suggestion of, any candidate or authorized committee or agent o party committee) any political party committee or its agent.	
Signature Date	79/74/2376

INRA SUPERPAC PO BOK 724 146107 BECHGROVE, IN 46107

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# Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received.

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Hand Delivered	Date of Receipt
Postmarked	Date of, Receipt
USPS First Class Mail	10/25/16
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
	,
USPS Priority Mail Express	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
Next Business	Day Delivery
Received from House Records & Registration Office	Date of Receipt
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	ceipt or Postmarked
PREPARER ()	U/J5116 DATE PREPARED